

Services for Treatment of Compulsive Gambling (G)
Gambling Treatment Resource Network
SFY 2011 (July 1, 2010 – June 30, 2011)

SPECIAL CONDITONS

I. POPULATION TO BE SERVED

- A. In accordance with the Contract, Contractor is required within the limits of the Contractor's resources, to assure the availability of, and to provide a necessary full continuum of care, as defined at IC 12-7-2-40.6;
- B. The Contractor shall ensure comprehensive services for Individuals receiving treatment by establishing and maintaining formal agreements with other appropriate service providers, including mental health services, social services, educational services, vocational rehabilitation services, and employment services for an Individual who meets the following requirements:
 - 1. The Individual is a resident of Indiana.
 - 2. The Individual is any age.
 - 3. The Individual has a disorder listed as 312.31 Pathological Gambling in the Diagnostic and Statistical manual of Mental Disorders, 4th edition, published by the American Psychiatric Association "DSMIV" as follows:
The Individual has experienced significant impairment in five (5) of the following areas during the course of the previous twelve (12) months:
 - a. Is preoccupied with gambling;
 - b. Needs to gamble with increasing amounts of money in order to achieve the desired excitement;
 - c. Has repeated unsuccessful efforts to control, cut back, or stop gambling;
 - d. Is restless or irritable when attempting to cut down or stop gambling;
 - e. Gambles as a way to escape problem or of relieving a dysphoric mood;
 - f. After losing money gambling, often returns another day to get even;
 - g. Lies to family members, therapist, or others to conceal the extent of involvement of gambling;
 - h. Has committed illegal acts such as forgery, fraud, theft, or embezzlement to finance gambling;
 - i. Has jeopardized or lost a significant relationship, job, or educational or career opportunity because of gambling;
 - j. Relies on others to provide money to relieve a desperate financial situation caused by gambling **OR**
 - 4. The Individual has a score of 3 or more on the South Oaks Gambling Screen (SOGS) reflective of gambling behavior over the past twelve months prior to screening.

II. ADMINISTRATIVE & FUNDING TERMS, REQUIREMENTS & LIMITATIONS

- A. The funding source which may support services in this attachment is the Following:
- The Gambler's Assistance Fund
- B. The following are understood and agreed by the parties:
1. All obligations of the State are contingent upon the availability and continued appropriation of State funds.
 2. As a matter of law, regardless of the event, the State shall not be liable for payment in excess of available appropriated funds for Compulsive Gambling Treatment Services.
 3. The Individual's registration will not cause the aggregate dollar amount paid to Contractor under this Contract to exceed the funds appropriated for that purpose.
- C. The compulsive gambling treatment fee for service shall meet the following requirements:
1. For each person eligible for compulsive gambling services, enrolled by the Contractor, and approved for payment by the DMHA, the Contractor shall submit a voucher and receive a fee for service payment. The definitions for reimbursable services shall be located in the Gambling Treatment Resource Network Operation Manual.
 2. **No income requirements shall be in effect for an Individual seeking gambling treatment services.**
 3. Fee for service payments **will not exceed \$2,500** per Individual. The fee for service scale shall be as follows:

| Modality/ Type of Service | Cost | Unit | Maximum Cost Per Client |
|---|----------|----------------------------|-------------------------|
| Individualized Treatment Plan | \$50.00 | Flat Fee | \$50.00 |
| 24 Hour Crisis Intervention | \$132.00 | Flat Fee | No Limit |
| Case Management (Services to prevent unnecessary treatment & hospitalization) | \$30.00 | Per hour (30 hour max) | \$900.00 |
| Intensive Outpatient | \$25.00 | Per hour (72 hour max) | \$1,800.00 |
| Substance Abuse Treatment | | No Fee for Service Payment | |
| Counseling and Treatment | \$20.00 | Per hour (20 session max) | \$400.00 |
| Acute Stabilization (including detox) | \$78.00 | Per Day (3days max) | \$234.00 |
| Problem Gambling Residential Services | \$50.00 | Per Day (14 days max) | \$700.00 |
| Problem Gambling Day Treatment | \$35.00 | Per Day (14 days max) | \$490.00 |
| Medication Eval and Monitoring | \$10.00 | Per day (60 days max) | \$600.00 |

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| Psychiatric Consultation | \$120.00 | Per hour (max 1) | \$120.00 |
| Financial Counseling | \$30.00 | Per hour | No Limit |
| Transportation | \$10.00 | Per trip | No Limit |
| Family Support Services | \$30.00 | Per hour (24 sessions max) | \$720.00 |
| Education Class | \$160.00 | Flat Fee for an 8 hour education class (1 max) | \$160.00 |
| Intake (includes the South Oak Gambling Screen and Enrollment) | \$50 | Flat Fee (max 1) | \$50.00 |

4. Contractor shall not submit any voucher for, nor shall the State pay for, any service if the voucher for payment is not submitted or processed in accordance with the State's procedures.

5. For each Individual eligible for DMHA services, the Contractor shall:

- maximize the use of non-state funds;
- maximize the use of alternative funding for services that are intrinsic elements of other state and/or local programs; and
- pursue all available third party sources of revenue, including Individual co-payments, where appropriate, for providing the full continuum of services needed for eligible Individuals.

D. The Contractor shall maintain in the clinical record the following information regarding each Individual registered pursuant to this attachment:

- A completed copy of the Adult Needs and Strengths Assessment (ANSA) assessment tool or CANS (Child and Adolescent Needs and Strengths) assessment tool.
- A completed copy of the SOGS. Payment will be made for Individuals meeting eligibility criteria with scores equal to or greater than three (3). The score must reflect gambling activity over the past twelve (12) months and be documented in the clinical record. To alleviate confusion, the following should be put at the top of each SOGS form: the Individual's name, unique ID, date the screen was completed and the time frame reflected on the SOGS (e.g. more than one year ago, less than one year ago or in the past six months). The date on the SOGS should correlate with the progress note.
 - State funding for gambling is allowable only for Individuals with a **current episode** of compulsive gambling. An Individual, who has a history of compulsive gambling but has not experienced problematic gambling behavior within the previous twelve (12) months, is not appropriate for gambling funding.
- If an Individual is diagnosed as a compulsive gambler, then this diagnosis must be reflected on the Individual's master treatment plan. The treatment plan should

specifically identify the problem to be addressed as compulsive gambling. Objectives and interventions shall support the goal.

4. If an Individual scores a three (3) or more on the SOGS which reflects gambling behavior over the past twelve (12) months, but refuses services for compulsive gambling, the refusal for treatment must be clearly documented in the progress notes. The progress note should specifically state that the Individual scored a 3 or more on the SOGS and was offered but refused a full continuum of care to address his/her compulsive gambling needs, including financial management counseling and linkage to GA meetings. The date of the progress note should correlate with the date on the SOGS.
 5. DARMHA will be the primary data collection system for the Gambler's Assistance Fund. However, the Contractor shall submit data into a companion data system to generate a voucher for payment of gambling services. The companion data system is the Web Infrastructure for Treatment Services (WITS). Data submission to generate a voucher for payment will include basic demographics, service encounter information and screening. Information will be submitted in accordance with the instructions in the Gambling Treatment Resource Network Operation Manual.
 6. If, upon assessment, the Contractor determines that the Individual is a member of a targeted population for which the Contractor is not certified, the Contractor shall not register the Individual into the DARMHA system, but shall refer the Individual to a provider that is also certified by DMHA. If the Individual has multiple areas of concern (i.e. mental illness and addiction), the contractor shall make every reasonable effort to ensure that the Individual is referred to appropriate services.
 7. During the course of mental health or addiction treatment, if the individual receiving services has a SOGS score of three (3) or more which reflects gambling behavior over the past twelve (12) months, the Contractor shall enter required data into WITS and may begin submitting vouchers for services as outlined in the Special Conditions.
 8. The Contractor shall not receive payment for services rendered until at least one (1) person from the Contractor's agency has successfully completed WITS training provided by DMHA.
 9. All services billed through WITS must be documented in an Individual's progress notes and meet the defined standard set for each payment point. Defined standards shall be located in the Gambling Treatment Resource Network Operation Manual.
- E. Compulsive gambling treatment counselor competency.

Any person who is qualified to provide counseling, therapy, case management, or like services as defined by the Indiana Professional Licensing Agency or by certification organizations recognized by DMHA and;

1. Documentation that the person has successfully completed thirty (30) hours of the DMHA approved training or training endorsed by the National Council on Problem Gambling, American Compulsive Gambling Counselor Certification Board, or the American Academy of Health Care Providers. Training must include a minimum of two (2) hours each of:
 - a. financial counseling;
 - b. screening/ assessment; and
 - c. treatment; or
2. Documentation that the person is working on obtaining thirty (30) hours of approved training and is actively supervised by a person who has successfully completed thirty (30) hours of the DMHA approved training or is nationally certified by the National Council on Compulsive Gambling, American Compulsive Gambling Certification Board, or the American Academy of Health Care Providers; or
3. Be a compulsive gambling counselor nationally certified by the National Council on Compulsive Gambling, the American Compulsive Gambling Certification Board, or the American Academy of Health Care Providers.

F. Special requirements:

1. Contractor shall provide financial management counseling to all Individuals seeking services for problem gambling. Financial management counseling at a minimum includes advice, assistance, and guidance in money management, budgeting, debt consolidation, and other related matters. Financial management counseling shall be clearly documented on an Individual's master treatment plan and recorded in the Individual's progress notes.
2. Linkage to self help groups such as Gamblers Anonymous (GA) will be offered as a part of the treatment episode. Linkage to self help groups should be documented clearly in the Individual's master treatment plan and evidenced in the Individual's progress notes.

3. If the Individual registered pursuant to this attachment has multiple diagnoses that include mental illness or substance abuse, that Individual must be treated for those conditions as well as compulsive gambling.
4. These services shall be available and accessible in as prompt a manner as reasonably possible and shall be available in a manner that preserves human dignity and assures continuity and high-quality care.
5. The Contractor shall provide the DMHA with an updated list quarterly of the persons in the agency qualified to provide gambling treatment services and the person's clinical supervisor.
6. The Contractor shall respond to referrals from the compulsive gambling hotline within one working day of the call.
7. The Contractor shall participate in quality improvement initiatives as requested by the DMHA.
8. The Contractor shall participate annually in a minimum of two (2) meetings or trainings that are specific to gambling and that are provided or authorized by the Division of Mental Health and Addiction.

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